## ISDH 2004 Hospital Service Report

(Annual Report under Indiana Code 16-21-6)

## **Elkhart General Hospital**

City: Elkhart Year: 2004

Provider Type: General Acute Hospital

	I. Inpatient Care				
Hospital Service Description				Average Charge Per Discharge	
Burn Care	0	0	0	\$0	
Cardiac Intensive	24	958	7,400	\$16,540	
ICU Med/Surg	0	0	0	\$0	
ICU Neonatal	0	0	0	\$0	
ICU Pediatric	0	0	0	\$0	
Medical/Surgical	148	8,343	38,634	\$4,574	
Neonatal Intermed	8	177	755	\$6,921	
Obstetrics	29	1,732	3,312	\$1,947	
Pediatric	20	834	2,154	\$2,214	

Psychiatric	0	0	0	\$0
Rehabilitation	16	519	2,025	\$4,627
Substance Abuse	20	417	4,473	\$9,704
Swing Beds	NA	0	0	\$0
Other Services	0	0	0	NA
Acute Subtotal	265	12,980	58,753	NA
Normal Newborn	25	1,500	3,078	\$1,187

II. Outpatient Visits				
Circulatory System	8,351	Digestive System	7,855	
Endocrine System	10,727	Injuries and Poison	16,267	
Mental Disorder	1,906	Musculoskeletal	12,323	
Neoplasms	6,062	Nervous	6,333	
Respiratory	8,218	Urinary	10,276	
Other/Unknown	81,803	Total Visits	170,121	
Number of Visits to Emerge	51,746			
Percent of Emergency Department Visits of Total Visits			30.4%	

## Identification of Hospital Services

Each hospital has identified if it has one or more of a standard list of 66 services. This list of 52 services is updated annually by each hospital from the information initially requested by the Centers for Medicare & Medicaid Services when the hospital was initially certified for Medicare payment. The other 14 services have been identified in other sections of this report.

N - Ambulance Service (Owned)	Y - Alcohol/Drug Service	Y - Anesthesia Services
N - Audiology	Y - Blood Bank	N - Cardiac Cath Lab
N - Cardiac-Thoracic Surgery	N - Chemotherapy Service	N - Chiropractice Service
Y - CT Scanner	N - Dental Service	Y - Dietetic Service
N - Extracorporeal Lithotripter	N - Gerontological Service	Y - Home Health Service
Y - Hospice	Y - Laboratory Anatomical	Y - Laboratory Clinical
N - Magnetic Resonance (MRI)	Y - Neonatal Nursery	N - Neurosurgical Service
Y - Nuclear Medicine	Y - Occupational Therapy	Y - Operating Room
N - Opthalmic Surgery	N - Optometric Service	N - Organ Bank
Y - Organ Transplant	N - Orthopedic Surgery	Y - Pharmacy
Y - Physical Therapy	N - PET Imaging	Y - Postoperative Recovery
N - Psychiatric Emergency	N - Psychiatric Child	N - Psychiatric Forensic
N - Psychiatric Geriatric	Y - Radiology Diagnostic	Y - Radiology Therapeutic
N - Reconstructive Surgery	Y - Respiratory Care	N - Rehab Inpat CARF
Y- Rehab Inpat Non CARF Acc	N- Rehab Outpatient	N- Renal Dialysis

Y - Social Services	Y - Speech Pathology	Y - Surgical Inpatient
Y - Surgical Outpatient	N - Trauma Center Certified	N - Transplant Cnt Medicare
N - Urgent Care Center		

NA =	Not applicable	NMF =	No meaningful figure NR =		Not reported

<u>Health Care Regulatory Services</u>

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